stressed and state legislatures have recognized, the time is now for the protection of confidential sources, and the safeguarding of the public's right to know. This issue is too important to remain unresolved as the year and the congressional session draw to a close. We urge you to press for immediate and favorable Senate floor consideration of the Free Flow of Information Act. Thank you.

If you have any questions or need additional information, please contact Paul Boyle or Laura Rychak of the Newspaper Association of America at 202-783-4697.

Very truly yours,

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## HONORING OUR ARMED FORCES

LIEUTENANT SETH PIERCE

Mr. HAGEL. Mr. President, I rise to express my sympathy over the loss of

U.S. Marine Corps 2LT Seth Pierce of Lincoln, NE. Lieutenant Pierce died on October 21 from injuries he sustained in an automobile accident on base at Quantico, VA, where he was stationed. He was 23 years old.

Lieutenant Pierce graduated from Lincoln Southeast High School in 2002, where he led the relay team to a State championship in 2001. After graduating from Arizona State University in 2006, he was commissioned as a second lieutenant into the U.S. Marine Corps.

All of Nebraska is proud of Lieutenant Pierce's service to our country, as well as that of the thousands of brave men and women serving in the U.S. Armed Forces.

Lieutenant Pierce is remembered as a devoted son, brother, and grandson. He is survived by his parents Larry and Linda; his brother Aaron, and his grandparents, Edwin and Ruth Steffens, and Luther and Esther Pierce.

I ask my colleagues to join me and all Americans in honoring 2LT Seth Pierce.

## MEDICARE PHYSICIAN PAYMENTS

Ms. STABENOW. Mr. President, if Congress does not act soon, Medicare payments to physicians and health care professionals will be cut by 10 percent on January 1, 2008 as a result of the fatally flawed sustainable growth rate formula.

This does not make any sense. While costs continue to increase, physicians will actually be paid less than they are paid today.

While a 10 percent cut in 2008 is completely indefensible, it does not end there. When combined with the additional cuts required under current law through 2016, physician payment rates will be reduced by approximately 40

What will be the result? Doctors will decrease the number of Medicare patients they accept, defer purchase of health information technology, and rural outreach services will be discontinued. The Medicare Program, which for more than 40 years has lifted countless seniors out of poverty, and has ensured access to necessary, affordable, quality medical care for our most vulnerable citizens, would be destabilized. The health of the nearly 42 million Americans who rely on Medicare would be threatened.

Physicians are the foundation of the Medicare Program and our Nation's health care system and patients of all ages depend upon them for health care services. Every aspect of our health care system, from hospitals to rural health clinics, relies upon the skills and services of physicians. Yet, on average, physician payments in 2007 are below what they were in 2001.

It defies common sense to think that payment rates that are lower today than they were 6 years ago will be enough to maintain the access to care our seniors need. Very simply put, the projected 2008—and beyond—payment

cuts will place beneficiary's access to health care at risk.

I am proud of the work that over 20,000 M.D.s and D.O.s in Michigan do, providing more than 1.4 million seniors and people with disabilities in Michigan with high-quality medical services under the Medicare Program.

I want them to be able to continue to do that, but there is simply no way that can be expected unless we do something now about the payment system used to reimburse physicians for Medicare services.

Physicians in Michigan will lose \$670 million for the care of elderly and disabled patients over the next 2 years due to the 10 percent cut in Medicare payments for 2008 and the additional 5 percent cut in 2009. My physicians are looking at cuts of more than \$10 billion by 2016 as a result of the SGR formula and 9 years of cuts.

We certainly cannot expect that physicians can continue to provide the same level of care while their payments are cut \$670 million over the next 2 years alone.

Several studies and surveys have shown that payment cuts will result in physicians modifying their participation in the Medicare Program and limiting the number of new Medicare patients they treat.

We also know from the studies that the lack of a predictable and equitable Medicare payment system encourages older physicians to retire, discourages younger physicians from entering specialties that predominately treat Medicare patients, and hinders investment in health information technology.

In addition to the studies that have been conducted, and our own common sense, the Medicare Payment Advisory Commission, an independent Federal body established by Congress in 1997 to advise us on issues affecting the Medicare program, has been telling us since 2001 that the Medicare sustainable growth rate formula is a flawed, inequitable mechanism for controlling the volume of services and that it should be repealed.

It is absolutely critical that ultimately Congress needs to enact a longterm solution to this issue. In the short term, we need to end the practice of dealing with the cuts on a yearly basis in a manner that results in deeper automatic physician payment reductions in future years.

At a minimum, I believe we must pass legislation this year that provides physicians with 2 years of positive Medicare payment updates and do so in a way that does not add to the cost of eliminating the SGR.

By providing 2 years of positive Medicare payment updates for physicians, we would avoid having to come back next year facing the same issue and would instead create the ability for Congress to develop a new, sustainable Medicare physician payment system.

I thank Senator BAUCUS, the Senate Finance chairman, for his work on behalf of Medicare beneficiaries and physicians and I fully support his goal of